

213000083603

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

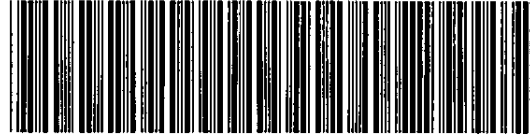
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2015 FEB -9 PM 4:59  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FEB 16 2015  
D. BRUCE

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Sales and Marketing Contractors LLC  
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark M. Hosemann

(Name of Person)

Brunini, Grantham, Grower & Hewes PLLC

(Firm/Company)

190 East Capitol Street, Suite 100

(Address)

Jackson, Mississippi 39201

(City/State and Zip Code)

For further information concerning this matter, please call:

Mark Hosemann

(Name of Person)

at ( 601 ) 973-8732

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

✓ \$25.00 Filing Fee and Certificate of Dissolution

--- \$55.00 Filing Fee, Certificate of Dissolution &  
Certified Copy (additional copy is enclosed)

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

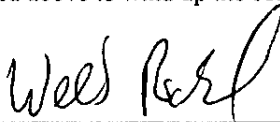
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**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is  
Sales and Marketing Contractors LLC
2. The Articles of Organization were filed on 6/10/2013 and assigned  
document number L13000083603
3. The delayed effective date the dissolution if not effective on the date of filing: N/A  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section  
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).  
A vote of the members owning the requisite percentage of membership interests  
required pursuant to the Operating Agreement.
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: Wells Richards, Trustee  
The Wells Richards Living Trust  
P.O. Box 1028  
Gulf Breeze, Florida 32561
6. Signature of an authorized person or if there are no members, the signature of the person appointed and  
listed above to wind up the company's activities and affairs:



Signature

Wells Richards, Trustee

Printed Name

**FILING FEE: \$25.00**

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TALLAHASSEE, FLORIDA

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## Notice of Limited Liability Company Dissolution

**NOTE: This page is optional**

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Sales and Marketing Contractors LLC

Document number of Limited Liability Company is: L13000083603

Date of dissolution was: Filing Date of this Notice

Description of information that must be included in a written claim:

The name, address and phone number of the claimant along with the nature of the  
claim, the basis for the claim and the amount of the claim.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

P.O. Box 1028

Gulf Breeze, Florida 32561

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Wells Richards, Trustee

Printed Name of the Person Filing

Wells Richards  
Signature of the Person Filing

**Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00**

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